

**K20000385401**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

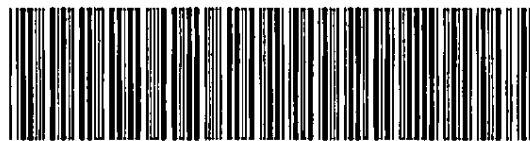
\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

per Ms. Howard add address  
& file on 7/7/21

Office Use Only



**400363028974**

04/22/21--01017--005 \*\*25.00



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 11, 2021

DIRK GARDNER  
28619 BLACK OAK LANE  
CASTAIC, CA 91384

SUBJECT: LOWE SPEED RACING, LLC  
Ref. Number: L20000355401

We have received your document for LOWE SPEED RACING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE ENTER ADDRESS FOR THE PERSON APPOINTED TO WIND UP THE COMPANY'S AFFAIRS.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 821A00012920

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 689 4th ST LLC

\_\_\_\_\_  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dirk Gardner

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

28619 Black Oak Lane

\_\_\_\_\_  
(Address)

Castaic CA 91384

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Dirk Gardner

818

612.8779

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &  
Certified Copy (additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

689 4th ST LLC

2. The Articles of Organization were filed on 10/14/2020 and assigned

document number L20000375401

3. The delayed effective date the dissolution is not effective on the date of filing: 10/14/2020  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes. (copy 605.0707 on back cover letter).

The Property was not able to be purchase.

The Property was not able to be purchase.

The Property was not able to be purchase.

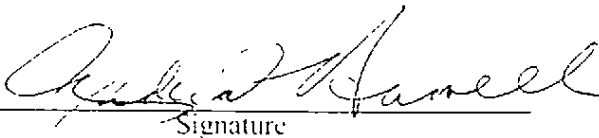
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Andrea Howell

28619 Black Oak Lane

Castaic, CA 91384

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:



Signature

Andrea Howell

Printed Name

FILING FEE: \$25.00